

pplication No. (if known): 10/809,675

Attorney Docket No.: 2055C(204231)

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Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1

page) Fee Transmittal (1 page) x2
Request for Continued Examination Transmittal (1 page)

Amendment and Reply (13 pages)

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PTO/SB/17 (10-07)
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Effection	ve on 12/08/2004.				Col	mplete if Knowi	า	
Fees pursuant to the Consolida			818).	Application Num	ber	10/809,675-Co	nf. #8433	<b>J</b>
FEE TRA	ANSM	ITTAL	Ĺ	Filing Date		March 25, 2004	1	
	FY 2008			First Named Inv	entor	Choong-Chin L	iew	
FO!	F 1 2000	<u> </u>		Examiner Name		J. C. Switzer		
X Applicant claims sma	Il entity status.	See 37 CFR 1.27		Art Unit		1634		
TOTAL AMOUNT OF PAYME	:NT	(\$) 930.00		Attorney Docket	No.	2055C(204231	)	
METHOD OF PAYMEN	IT (check all ti	hat apply)		_				
Check Credit	Card M	Money Order	Non	e Other (	olease iden	tify):		
X Deposit Account Dep	osit Account Numb	er: 04-11	05	Deposit A	Account Nar	<sub>ne:</sub> Edwards Angell	Palmer &	Dodge LLP
For the above-iden	tified deposit a	account, the Direc	ctor is	hereby authorize	d to: (ch	eck all that apply)		
x Charge fee(s	) indicated bel	ow		Charge	e fee(s) ii	ndicated below, ex	cept for t	he filing fee
	additional fee(s	s) or underpayme	nts of	x Credit	any over	payments		
FEE CALCULATION	<u> </u>							
1. BASIC FILING, SEARC	H, AND EXAM	INATION FEES						
		G FEES	SEA	RCH FEES	EXAM	INATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$) F	ee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fees	Paid (\$)
Utility	310		510	255	210	105	1003	uiu (V)
Design	210		100	50	130	65		•
Plant	210		310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description Each claim over 20 (include	ling Daissues)						Fee (\$) 50	<u>Fee (\$)</u> 25
Each independent claim ov							210	105
Multiple dependent claims		.g 110100000)					370	185
		ee (\$)	Fee P	aid (\$)	P	Multiple Depende		
	x			<u> </u>	-		ee Paid (	
HP = highest number of total cla	aims paid for, if gr	eater than 20.						<u> </u>
Indep. Claims Extra	Claims F	ee (\$)	Fee P	aid (\$)				
-3=	×	<del> </del>						
HP = highest number of independent	·	for, if greater than 3.						
3. APPLICATION SIZE FE If the specification and dr		d 100 sheets of n	aner (	excluding electro	nically:	filed sequence or o	computer	
listings under 37 CFR	1.52(e)), the	application size f	ee due	is \$260 (\$130 f	or small	entity) for each ad	Iditional 5	0
sheets or fraction there								
	Extra Sheets			ditional 50 or frac			<u>Fee</u>	Paid (\$)
		/50 =		(round up to a who	le number	r) x =	: <u></u>	
4. OTHER FEE(S)	.' 6120 C		. 1				<u>Fees</u>	Paid (\$)
Non-English Specificat		e (no small entity 253 Extension fo	or res	ount <i>)</i> ponse within th	ird mon	th	50	25.00
Other (e.g., late filing s	28	801 Request for	conti	nued examinat	ion (RC	E) (see 37		05.00
SUBMITTED BY								
	7.01.	1 EUOIIA A		Registration No.	34,380	) Telephone	(617) 23	9-0451
Limit-V.	<i>De Clarus</i> n Williams	1 1777 C		(Attorney/Agent)	. ,	Date	June 16	

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

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FEE TRANSMITTAL For FY 2008  X Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT  Check Credit Card Money Order None Other (please identify):  X Deposit Account Deposit Account Number:  X Charge fee(s) indicated below Charge fee(s) indicated below See(s) indicated below Tele(s) indicated below, except for the filing fee Tele(s) Tele(s) indicated below, except for the filing fee Tele(s) Indicated below, except for the filing fe
FOR FY 2008    First Named Inventor   Choorig-Chill Liew
TOTAL AMOUNT OF PAYMENT   (\$) 930.00   Attorney Docket No.   2055C(204231)
Application Type   Fee (s)   Fee (
METHOD OF PAYMENT (check all that apply)   Check
Check Credit Card Money Order None Other (please identify):    Deposit Account   Deposit Account Number:   04-1105   Deposit Account Name: Edwards Angell Palmer & Dodge LLP
Deposit Account   Deposit
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below
X   Charge fee(s) indicated below   X   Charge fee(s) indicated below, except for the filing fee   X   Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments   E   Constitution   X   Credit any overpayments   E   Examplements   E   Examplements   E   Examplements   E   E   E   E   E   E   E   E   E
X   Charge fee(s) indicated below   X   Charge fee(s) indicated below, except for the filing fee   X   Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments   X   Credit any overpayment
FEE CALCULATION   1. BASIC FILING, SEARCH, AND EXAMINATION FEES   Small Entity   Fee (\$)   Fee
The computer of total claims   Fee (\$)   Fee
Filling FEES   Small Entity   Fee (\$)   Fee
Application Type
Application Type
Utility
Plant
Reissue 310 155 510 255 620 310  Provisional 210 105 0 0 0 0 0  2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  -3 =
Provisional 210 105 0 0 0 0 0  2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  -3 =
2. EXCESS CLAIM FEES  Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  Fee Paid (\$)
Fee (\$)   Fee (\$)
Fee Description Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  APPLICATION SIZE FEE  Fet Paid (\$)  Sheets of paper (excluding electronically filed sequence or computer
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  APPLICATION SIZE FEE  If the greatification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the greatification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
Total Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims    -20 =
-20 = x = Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  -3 = x =  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the greatification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
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-3 = x =  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the greation and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the provisions and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
3. APPLICATION SIZE FEE  15 the provision and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
Is the energification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
Total Sheets   Extra Sheets   Number of each additional 50 of fraction thereof   100 =
4. OTHER FEE(S)
- 22 - 7 - 131 Guardian C130 foo (no small entity discount)
Other (e.g., late filing surcharge): 2253 Extension for response within third month 525.00 2801 Request for continued examination (RCE) (see 37 405.00
SUBMITTED BY
Signature (Armul 54849 for ) Registration No. 34,380 Telephone (617) 239-0451
Name (Print/Type) Kathleen Williams Date June 16, 2008